

## PART B - FEE(S) TRANSMITTAL

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**INSTRUCTIONS:** This form should be used for submitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence regarding the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or indicated otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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022913 7590 10/26/2005

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 (P/O/A WORKMAN NYDEGGER & SHELLEY)  
 60 EAST SOUTH TEMPLE  
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 SALT LAKE CITY, UT 84111  
 01/27/2006 TBESHAR 00000106 10809880

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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

ERIC L. MASCHOFF (Depositor's name)  
 [Signature] (Signature)  
 January 26, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/809,880	03/25/2004	Samantha Bench	15436.323	7792

TITLE OF INVENTION: METHOD AND APPARATUS FOR TESTING PCBA SUBCOMPONENTS

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	01/26/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
TSAL, CAROL S W	2857	702-117000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.163).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 WORKMAN NYDEGGER

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Elinsar Corporation

Sunnyvale, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 1

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.  
☒ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-3178 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  
 NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date January 26, 2006

Typed or printed name

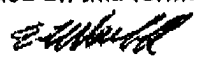
ERIC L. MASCHOFF

Registration No. 36,596

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)				Docket No. 15436.325	
Applicant(s): Samantha Beach et al.					
Application No. 10/809,880	Filing Date March 25, 2004	Examiner Carol S.W. Tsai	Customer No. 022913	Group Art Unit 2857	Confirmation No. 7792
Invention: METHOD AND APPARATUS FOR TESTING PCBA SUBCOMPONENTS					
<p style="text-align: center;">Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith are the following for the above-identified application.</p> <p><input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-B5</p> <p><input checked="" type="checkbox"/> Utility Fee: \$ 1400.00      <input type="checkbox"/> Design Fee: _____      <input type="checkbox"/> Plant Fee: _____</p> <p><input checked="" type="checkbox"/> Publication Fee: \$ 300.00</p> <p><input type="checkbox"/> A check in the amount of _____ is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 23-3178 as described below.</p> <p>    <input type="checkbox"/> Charge the amount of _____</p> <p>    <input checked="" type="checkbox"/> Credit any overpayment.</p> <p>    <input checked="" type="checkbox"/> Charge any additional fee required.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p> _____ Signature</p> <p>Dated: January 26, 2006</p> <p>ERIC L. MASCHOFF Attorney for Applicants Registration No.: 36,596</p> <p>CC:</p> <div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><p style="text-align: center;"><b>Certificate of Transmission by Facsimile</b> This certificate may only be used if paying by deposit account.</p><p>I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States and Trademark Office (Fax No. _____) on _____ (Date)</p><p>_____ Signature</p><p>_____ Typed or Printed Name of Person Signing Certificate</p></div><div style="width: 45%;"><p style="text-align: center;"><b>Certificate of Mailing by First Class Mail</b></p><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date)</p><p>_____ Signature of Person Mailing Correspondence</p><p>_____ Typed or Printed Name of Person Mailing Correspondence</p></div></div>					

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